

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hirokazu SHODA et al.

Title: IMAGE COMPRESSION APPARATUS, IMAGE
DEPRESSION APPARATUS AND METHOD
THEREOF

Appl. No.: Unassigned

Filing Date: September 19, 2001

Examiner: Unassigned

Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional
utility patent application of:

Hirokazu SHODA
Sunao TABATA

Enclosed are:

- [X] Non-English Specification, Claims, and Abstract (19 pages).
- [X] Informal drawings (12 sheets, Figures 1-13).
- [X] Unexecuted Declaration and Power of Attorney (4 pages).
- [X] Information Disclosure Statement.
- [X] Form PTO-1449 with copies of 2 listed references.

The filing fee is calculated below:

| | Claims as Filed | Included in Basic Fee | Extra Claims | Rate | Fee Totals |
|---|--------------------|--------------------------|-----------------|-------------------|---------------|
| Basic Fee | | | | \$710.00 | \$710.00 |
| Total Claims: | 19 | - 20 | = 0 | x \$18.00 | = \$0.00 |
| Independents: | 8 | - 3 | = 5 | x \$80.00 | = \$400.00 |
| If any Multiple Dependent Claim(s) present: | | | | + \$270.00 | = \$0.00 |
| Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee | | | | + \$130.00 | = \$130.00 |
| | | | | SUBTOTAL: | = \$1240.00 |
| [] Small Entity Fees Apply (subtract ½ of above): | | | | | = \$0.00 |
| | | | | TOTAL FILING FEE: | = \$1,240.00 |
| Processing Fee under 37 CFR 1.17(k) for Late Filing of English Translation of Application: | | | | + \$130.00 | = \$130.00 |
| | | | | TOTAL FEE | = \$1,370.00 |

[X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

[] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By Johnny A. Kumar

Date September 19, 2001

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